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**TRANSMITTAL  
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/498,704
		Filing Date	February 7, 2000
		First Named Inventor	Paul S. USTER
		Art Unit	1615
		Examiner Name	Kishore
Total Number of Pages in This Submission	9	Attorney Docket Number	5325-0162.30

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Judy M. Mohr; ALZA Corporation
Signature	<i>Judy M. Mohr</i>
Date	June 9, 2004

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. VIA EXPRESS MAIL LABEL EV 325 437 930 US			
Typed or printed name	Lois E. Miller		
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**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: USTER ET AL..

APPLICATION No.: 09/498,704

FILED: FEBRUARY 7, 2000

FOR: **LIPOSOME COMPOSITION AND METHOD FOR  
ADMINISTRATION OF A RADIOSENSITIZER**

EXAMINER: KISHORE

ART UNIT: 1615

CONF. No: 9201

**Amendment Under 37 C.F.R. § 1.116**

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Sir:

The present paper is in response to the Office Action dated March 15, 2004 in the above-identified application.

The Claims are reflected in the listing of claims beginning on page 2.

Amendments to the specification begin on page 5.